

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



CITY OF PORTLAND

BUILDING PERMIT

This is to certify that CITY OF PORTLANAND

Located At 356 STATE ST

Job ID: 2012-10-5123-SE

CBL: 035- I-001-001

has permission to Hospice of Southern ME Tent event 10/20/12

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statues of Maine and of the Ordinances of the City of Portland regulating the construction, maintenance and use of the buildings and structures, and of the application on file in the department.

Notification of inspection and written permission procured before this building or part thereof is lathed or otherwise closed-in. 48 HOUR NOTICE IS REQUIRED.

A final inspection must be completed by owner before this building or part thereof is occupied. If a certificate of occupancy is required, it must be

Fire Prevention Officer


Code Enforcement Officer / Plan Reviewer

10-16-12

**THIS CARD MUST BE POSTED ON THE STREET SIDE OF THE PROPERTY
PENALTY FOR REMOVING THIS CARD**

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY)

or email: buildinginspections@portlandmaine.gov

With the issuance of this permit, the owner, builder or their designee is required to provide adequate notice to the city of Portland Inspections Services for the following inspections. Appointments must be requested 48 to 72 hours in advance of the required inspection. The inspection date will need to be confirmed by this office.

- **Please read the conditions of approval that is attached to this permit!! Contact this office if you have any questions.**
- **Permits expire in 6 months. If the project is not started or ceases for 6 months.**
- **If the inspection requirements are not followed as stated below additional fees may be incurred due to the issuance of a "Stop Work Order" and subsequent release to continue.**

The project cannot move to the next phase prior to the required inspection and approval to continue, REGARDLESS OF THE NOTICE OF CIRCUMSTANCES.

IF THE PERMIT REQUIRES A CERTIFICATE OF OCCUPANCY, IT MUST BE PAID FOR AND ISSUED TO THE OWNER OR DESIGNEE BEFORE THE SPACE MAY BE OCCUPIED.



PORTLAND MAINE

Strengthening a Remarkable City, Building a Community for Life • www.portlandmaine.gov

Director of Planning and Urban Development
Jeff Levine

Job ID: 2012-10-5123-SE

Located At: 356 STATE ST

CBL: 035- I-001-001

Conditions of Approval:

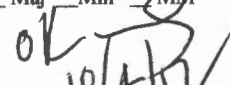
Fire

1. Tents shall have an approved fire resistant rating and maintain 10' between stake lines. No smoking or open flame allowed within 10'. Provide at least one 2A:10 BC fire extinguisher.
2. If the sides of the tents are to be enclosed at least two remotely located and marked exits shall be provided.
3. Fuel-fired heating equipment and propane tanks shall be installed outside of the tents and not within 5 feet of the tents or an exit discharge.
4. Cooking within the tents has not been reviewed and approved.

City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, FAX: (207) 8716

Job No: 2012-10-5123-SE	Date Applied: 10/4/2012	CBL: 035-1-001-001	
Location of Construction: 356 STATE ST - DEERING OAKS	Owner Name: CITY OF PORTLAND	Owner Address: 389 CONGRESS ST PORTLAND, ME 04101	Phone:
Business Name: Hospice of Southern ME	Contractor Name: Susan Hubbard	Contractor Address: 180 US Route 1, Scarborough, ME 04074	Phone: 289-3669
Lessee/Buyer's Name:	Phone:	Permit Type: TENTS	Zone: ROS
Past Use: City Park - Deering Oaks	Proposed Use: Same: City Park - to erect a 20' x 40' tent for Hospice of Southern ME on 10/20/12 with a rain date of 10/21/12	Cost of Work:	CEO District:
		Fire Dept: 10/16/12 <input checked="" type="checkbox"/> Approved w/ conditions <input type="checkbox"/> Denied <input type="checkbox"/> N/A	Inspection: Use Group: <input checked="" type="checkbox"/> Type: Tent Temp Structure Signature: 
Proposed Project Description: Tent event 10/20/12		Pedestrian Activities District (P.A.D.)	

Permit Taken By: Brad	Zoning Approval		
<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building Permits do not include plumbing, septic or electrical work.</p> <p>3. Building permits are void if work is not started within six (6) months of the date of issuance. False informatin may invalidate a building permit and stop all work.</p>	Special Zone or Reviews	Zoning Appeal	Historic Preservation
	<input type="checkbox"/> Shoreland <input type="checkbox"/> Wetlands <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <input type="checkbox"/> Maj <input type="checkbox"/> Min <input type="checkbox"/> MM Date: 	<input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date:	<input type="checkbox"/> Not in Dist or Landmark <input type="checkbox"/> Does not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date:

CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in the application is issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE



Tent/Canopy or Temporary Event Staging Permit Application

Entered 10/4/12
(15)

2012-10-5123-SE

If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Location/Address/Park of Installation: 356 State St. Deering Oaks Park, Portland, ME		
Date of Set up/Event: 10/20/12 (rain date: 10/21/12)		Date of Breakdown/ End of Event (Rain date: 10/21/12)
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# 035 1001	Property Owner: City of Portland	Telephone:
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: Hospice of Southern ME 180 US Route One #1 Scarborough, ME 04074	Fee: \$30.00

The permit fee and the following items must be completed and submitted along with this application in order to receive a permit.

1. Certificate of Flammability
2. Letter of approval from property owner.
If the City is owner, attach a completed copy of Application to Use City Parks & Public Space from Parks & Recreation (756-8275).
3. Company name of installer (contact info).
4. Plot Plan showing the following:
Tent/Canopy or temporary event staging locations, including dimensions, exits and entrances of proposed and existing, parking and existing building locations. If this is temporary staging, you will need to include product information. (Applicant may call Parks & Recreation for maps of Portland's Parks @ 756-8275).
5. If the City is the property owner, Certificate of Insurance listing the City as additional insured. Minimum amount of coverage is \$400,000.00

RECEIVED
OCT 04 2012
Dept. of Building Inspections
City of Portland, Maine

Who should we contact when permit is ready: Susan Hubbard, Hospice of Southern ME
Address: 180 US Route One #1 Scarborough, ME 04074 Telephone: 207-289-3609

Please submit all of the information outlined in the Tent/Canopy and Event Staging Permit Application as one package. Failure to do so will result in the automatic denial of your permit.

In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information visit us on-line at www.portlandmaine.gov, stop by the Building Inspections office, room 315 City Hall or call 874-8703.

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

Signature of applicant: <i>[Signature]</i>	Date: 9/26/12
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This is not a permit; you may not commence ANY work until the permit is issued.



PORTLAND MAINE

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Receipts Details:

Tender Information: Check , Check Number: 13945

Tender Amount: 30.00

Receipt Header:

Cashier Id: bsaucier

Receipt Date: 10/4/2012

Receipt Number: 48970

Receipt Details:

Referance ID:	8269	Fee Type:	BP-Tent/Event
Receipt Number:	0	Payment Date:	
Transaction Amount:	30.00	Charge Amount:	30.00
Job ID: Job ID: 2012-10-5123-SE - Tent event 10/20/12			
Additional Comments: 336 State St.			

Thank You for your Payment!

Pagoda



CALIFORNIA DEPARTMENT OF FORESTRY and FIRE PROTECTION
OFFICE OF THE STATE FIRE MARSHAL

REGISTERED FLAME RESISTANT PRODUCT

Product:

PRECONTRAIN 702 BLACKOUT

Registration No.

F-14408

Product Marketed By:

FERRARI SA
BX54, 38352 LA TOUR DU PIN
LA TOUR DU PIN, FRANCE

This product meets the minimum requirements of flame resistance established by the California State Fire Marshal for products identified in Section 13115, California Health and Safety Code.

The scope of the approved use of this product is provided in the current edition of the CALIFORNIA APPROVED LIST OF FLAME RETARDANT CHEMICALS AND FABRICS, GENERAL AND LIMITED APPLICATIONS CONCERNS published by the California State Fire Marshal.

Pat Sanchez

Deputy State Fire Marshal

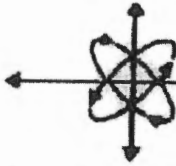
Expire: 06/30/2004

FR-1



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DIVERSIFIED
TESTING LABORATORIES, INC.

"We Test For Your Request"

336 WEST FRONT STREET
P.O. BOX 4004
BURLINGTON, NORTH CAROLINA 27215
Phone (336) 227-7710 • Fax (336) 227-1175

January 9, 2003

Ms. Catherine MERILLON
FERRARI SA
BP 54
38332 La TOUR Du Pin Cedex
La Mure, France

Reference: Laboratory Test Report
Lab Identification No. 5349
Invoice No. R270 (Attached)

Dear Ms. MERILLON:

One (1) fabric sample, identified as **PRECONTRACT 702**, was received and tested in accordance with the National Fire Prevention Association No. 701, "Flame Propagation of Textiles and Films, 1999 Edition, (Test 2, Large Scale)". The results are as follows:

<u>Specimen Number</u>	<u>Afterflame</u> <u>(seconds)</u>	<u>Residual Flame</u> <u>(seconds)</u>	<u>Char Length</u> <u>(inches)</u>
Single 1	0.0	0.0	16.0
Flat 2	0.0	0.0	11.0
Specimen 3	0.0	0.0	11.0
4	0.0	0.0	10.0
5	0.0	0.0	10.0
6	0.0	0.0	10.0
7	0.0	0.0	12.0
8	0.0	0.0	7.0
9	0.0	0.0	10.0
10	0.0	0.0	8.0

The sample submitted meets the minimum requirements of the above standard. The length of char on the individual single flat specimens shall not exceed 17.1 inches. Additionally, no specimen shall continue flaming for more than two (2) seconds after the test flame is removed and no residues shall fall to the floor of the test chamber and continue flaming for more than two (2) seconds at any time during the test.

If there are any questions or when we can be of further assistance, please let us know.

Sincerely,

Karon S. Watkins
Karon S. Watkins

KSM/mr
Attachment

OUR LETTERS AND REPORTS ARE FOR THE EXCLUSIVE USE OF THE CLIENT TO WHOM THEY ARE ADDRESSED. ANY COMMUNICATIONS TO OTHERS OR THE USE OF OUR COMPANY NAME MUST RECEIVE PRIOR APPROVAL. OUR TEST RESULTS APPLY ONLY TO THE SAMPLE TESTED AND ARE NOT NECESSARILY INDICATIVE OF THE QUALITY OF ANY OTHER PRODUCT OR SERVICE PROVIDED. SAMPLES NOT DESTROYED IN TESTING ARE RETURNED A MAXIMUM OF THIRTY DAYS, THE EXPIRES, UNLESS WE ARE ADVISED BY THE CLIENT. TESTING LABORATORIES, INC. MAY NOT BE USED IN ADVERTISING TO THE GENERAL PUBLIC.



CITY OF PORTLAND, RECREATION and FACILITIES MANAGEMENT
PUBLIC PARK & SPACE APPLICATION (3 pages)
 134 Congress St. ~ Suite 2 ~Portland ~ ME ~ 04101
 207-756-8275 ~ Fax 207-756-8279
 tvn@portlandmaine.gov

For uses of city property, there are typically: 1. fees charged for use of the area
 2. a security deposit required 3. insurance required
 (There may be fees due and applications required from other City Departments)

TODAY'S DATE	3-14-12	ORGANIZATION NAME	Hospice of Southern Maine				
ORGANIZATION ADDRESS	180 US Route 1 #1	CITY	Scarborough	STATE	ME	ZIP	04074
CONTACT NAME(S)	Susan Hubbard	TITLE	Development Coordinator				
HOME #	Work 289-3669	WORK	CELL	207-883-1040	FAX		
EMAIL	shubbard@hospiceofsouthernmaine.org		EMAIL				

PARK AREA OR PUBLIC SPACE REQUESTED	Deering Oaks Park, Footbridge and Ravine Area				
EVENT DAY & DATE(S)	October 20, 2012	SAT	RAIN DAY & DATE(S)	October 21, 2012	(SUN)
EVENT START TIME (i.e. set-up start time)	1:00 pm	EVENT END TIME (i.e. when event cleanup is complete)	8:30 pm	ACTUAL START & END TIME OF EVENT	4:45pm to 7:30 pm (elec at 3pm)

EVENT NAME		EXPECTED ATTENDANCE
2012 Twilight In The Park		250
DESCRIPTION OF EVENT:		
<p>Twilight in the Park is an annual Luminaria lighting event for remembering those who have brought love and light to our lives. 1000 votive candles are lit in a dramatic and touching display of light. Ceremony includes reading, words from families and friends, music (PA system) and refreshments.</p> <p>A large tent (20 x 30..?) is set up on the grass area beside the farmers market roadway. Elec. Is needed.</p>		
IS THERE A REGISTRATION FEE?		
IF YES, HOW MUCH?	FEE	\$
	STUDENT FEE	\$

WHAT WILL BE THE ANTICIPATED NEED FOR PARKING AND WHAT IS YOUR PARKING PLAN?
All public roadways and available lots in the park, King's Court, Tennis Court Road, and Farmer's Market Road during set-up

PLEASE CHECK OFF AND ANSWER:

PLEASE SEE ATTACHED FEE SCHEDULE / DEPT. INFORMATION IF YOU ANSWER YES

	X-YES	X-NO	X-NOT SURE
* Are you setting up a canopy(s) ? (canopy is 10x10 size) How many:		X	
* Do you wish to set up a tent(s) ? (a canopy or tent larger than 10x10 needs to be approved by Recreation and a Tent Permit issued from Inspections Division; please call Inspections for information on their application process / PLEASE give them at least a 2-week notice). Recreation will contact Inspections once the tent location is approved so that the Tent Permit Application may go forward. State size(s): 20X40X8 Exact Location(s) of Tent Placement Requested: In order to drive tent stakes into the ground, DIG SAFE must be contacted: 888-344-7233.	X		
* Will you be setting up tables and/or chairs ? How many tables: 2-3 chairs: 0	X		
* Are other items or equipment being placed on City property? (i.e. Moon Bounce, Dunk Tank, Radio Station Van, Helium Tank, etc.) Please List:		X	
* Will there be refreshments at the event?		X	

	Do you wish to sell food ? no (If so, you will need approval from Recreation) List food and drink: A Temporary Food Service License (from the City Clerk's Office) is needed, even if food is given away (and even if it is pre-packaged). PLEASE give the Clerk's Office at least a 2-week notice.			
*	Do you wish to sell non-food items (like T-shirts, crafts, cd's, etc.) ? If so, you will need approval from Recreation, and you will need to apply for a Street Goods Vendor License(s) at the City Clerk's Office. List items you wish to sell:		X	
*	Are you setting up a PA (sound) system ? Are you planning on having Amplified Music ? If so, your event requires a concert license from the City Clerk's Office. (Just voice – i.e. Press Conference, would not require the license because it is not music). For amplified music/speech, there are time restrictions for the Downtown Parks & Squares (music limited to 11:45am – 1:15pm, and 1 hour between 5pm - 8pm).	X X		
*	Will your event require electricity ? Electricity is available at some of the parks & squares	X		
*	Are you planning on bringing a Grill for a Barbecue ?		X	
*	Will the event require reserved parking spaces / parking meters ? How many?		X	
*	Will your event need safety vests, signs, barricades and/or cones ? Please list what you would like to borrow: A few orange vests and cones may usually be borrowed from Recreation. Barricades and signs are borrowed from Public Services, Customer Service.		X	
*	Will your event require street closures ? (Please be specific under "Description of Event")		X	
*	Will your event require Police assistance? An event such as a road race, march in the		X	
*	Will your event require Fire/EMS assistance? (For a large walk/race, it is recommended.)		X	
*	Will your event require porta-restroom rental(s) or need existing porta-restrooms cleaned? (Some of the parks already have porta-restrooms. Event participants may use these, but a \$25 fee is assessed for events where attendance is 150 or more.)		X	
*	Do you wish to have a banner over the street to advertise your event ? (Banners hung over Congress St. or Baxter Blvd). Banner inquiries directed to Vicki Allen, Recreation.	X		

INSURANCE CERTIFICATE INFORMATION

*	Will your event require liability Insurance? (For an event such as a walkathon, race, festival, press conference, concert, etc., the city requires insurance coverage - general liability. The City of Portland needs to be named as additional insured in regards to the event activities on that date). If your event has been approved for serving food, Product Liability is also required, in addition to General Liability.	X		
♦	If you answered yes, please have "City of Portland, Maine" listed as additional insured on the certificate (minimum coverage: \$400,000) and have your insurance company fax a copy to Recreation: 207-756-8279 or e-mail to: tvmm@portlandmaine.gov			

RECREATION POLICIES

ELECTRICITY

All cords in the public way must be covered by rugs, mats or orange cones to avoid public hazard. If weather is inclement (drizzle, rain, snow, etc.) we require that you **not use** electricity, unless all connections and equipment are covered and protected from the elements.

PORTA-RESTROOMS / BATHROOM FACILITIES

Porta-Restrooms are required for large events and events where food is being served. Some of Portland's parks already have portable restrooms (*Preble Street Grass Area at the Preble Street Parking Lot – across from Hannafords, *Entrance to Dyer's Flat – beside Payson Park, *Deering Oaks Park – near the Playground, *East End Beach). If over 150 people are expected to attend the event, a \$25 user fee is required (paid to Recreation). The restrooms are cleaned M, W, & F. If you would like to guarantee that they are cleaned just prior to your event, then you need to call the porta-restroom company (Associated Septic, 799-1980, M-F) to request and pay for a cleaning.

TRASH

All groups must abide by our Carry In/ Carry Out Policy. Please bring extra trash bags and/or trash receptacles and remove all trash. You will need to haul all of your trash out of the park/public space or forfeit the security deposit(s). The area will be checked following your event and if the park is clean and conditions for use adhered to, your security deposit will be returned to you. Thank you in advance!

PARKING ON GRASS AREAS / SIDEWALKS / ILLEGALLY PARKED VEHICLES

Portland Recreation has a strict policy that prohibits vehicles from parking on grass areas/sidewalks/park streets. \$10 will be deducted from your security deposit for each vehicle parked on grass/sidewalk areas or vehicles parked illegally. **Any tire ruts/damage to the grass areas would mean a forfeit of your security deposits.**

TOBACCO FREE ZONES

By city ordinance, smoking is prohibited at and within 20 feet of the following outdoor recreation and event areas: downtown squares and plazas, trails, parks, playgrounds, beaches, and athletic facilities. Please make sure you pass this information along to participants / spectators at the event.

NOTIFICATION

Please keep a copy of this permit on site at all times. City staff may require proof of permit.

REVOCABLE PERMIT

- ◆ The City reserves the unconditional right to control or cancel events to protect and/or prohibit damage to public property.
- ◆ The City reserves the unconditional right to revoke or revise an issued permit.

I HAVE READ AND UNDERSTAND ALL OF THE ABOVE POLICIES	TYPE INITIALS	SH	DATE	03-14-12
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ASSUMPTION OF RISK & LIABILITY

Users of the area agree to accept the grounds in an "as is" condition and shall be responsible for all risk and liability in using the park/public space area for the said event. By returning this form, (should permission be granted to use city property), the above parties agree to indemnify and hold harmless the City of Portland, its employees and agents, from and against all claims arising out of activities during said event.

I have read the Assumption of Risk & Liability Agreement	TYPE INITIALS	SH	DATE	03-14-12
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CREDIT CARD INFORMATION

Visa or MasterCard Number		Exp Date (Mon/Yr)	
CREDIT CARD WILL ONLY BE CHARGED FOR SECURITY DEPOSIT(S) AS NEEDED			

PLEASE MAKE CHECKS PAYABLE TO "CITY OF PORTLAND"

- ◆ Please make out security deposit checks separate from permit fees.

TOTAL AMOUNT(S) DUE TO RECREATION (Please make all security deposit checks out separately)

Permit Fee for use of area: \$40 first hr. plus \$35 each additional hr. (i.e. a 3 hour event totals \$110) If your event is rained out / cancelled, the bulk of the fee is returned (however \$40 is non-refundable) Number of Hours of Use: 7 HOURS	\$ 250 + \$125 (rain date) \$375 total due	Vest, Barricade, Cone Deposit: \$10 per/item	\$
Electricity: \$5per/hr approx 3 hours	\$ 15 due	Public Space / Park Security Deposit: \$100	\$ 100 due
Key Deposit: \$50 per key	\$	Other (Porta-Restroom User Fee, etc.)	\$ 25 due

FOR OFFICE USE ONLY

DATE REC'D APPLICATION	3-14-2012	DATE REC'D INSURANCE	Need	PERMIT FEE AMT REC'D	\$ Need	SECURITY DEPOSIT	\$ Need
PAYMENT TYPE							
VISA	\$	MC	\$	CK #	CK AMOUNT	\$	CASH AMT

Leavitt & Parris Tent Rentals

356 Read Street
Portland, ME 04103
(207) 797-0100



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
9/27/2012

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER P&C Insurance 260 Main St. P.O. Box 356 Biddeford ME 04005	CONTACT NAME: Tracy Wiles, ACSR	
	PHONE (A/C No. Ext): (207) 283-1486	FAX (A/C No.): (207) 283-4258
E-MAIL ADDRESS: twiles@insurancepc.com		
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A: American Alternative Ins Corp		
INSURER B:		
INSURER C:		
INSURER D:		
INSURER E:		
INSURER F:		

COVERAGES CERTIFICATE NUMBER: CL1292700513 REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY		VHHHGG3050912	10/1/2012	10/1/2013	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY					DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000
	<input checked="" type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR					MED EXP (Any one person) \$ 50,000
						PERSONAL & ADV INJURY \$ 1,000,000
						GENERAL AGGREGATE \$ 3,000,000
						PRODUCTS - COMP/OP AGG \$ 3,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					\$
	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> ANY AUTO					
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> SCHEDULED AUTOS				
	<input type="checkbox"/> HIRED AUTOS	<input type="checkbox"/> NON-OWNED AUTOS				
	UMBRELLA LIAB <input type="checkbox"/> OCCUR					EACH OCCURRENCE \$
	EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE					AGGREGATE \$
	DED <input type="checkbox"/> RETENTION \$					\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY					WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/>	N/A			

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
As respects to General Liability, certificate holder is an additional insured when required by contract, agreement or permit. Event: Twilight in the Park-Event Date October 20, 2012

CERTIFICATE HOLDER City of Portland 389 Congress Street Room 315 Portland, ME 04101	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE P Duranceau/TRACY